

TEAM HOUSING FORM

2022 AGGIELAND INVITATIONAL BASKETBALL TOURNAMENT

This form must be received before we can arrange your hotel accommodations.

Please return to Compete College Station by October 15, 2022

Team:	Coach:
Address:	
Phone/Fax: E	-mail:
	CALL YOUR ASSIGNED HOTEL DIRECTLY FOR A SPECIAL RATE*
·	ED WITH YOUR HOTEL INFORMATION
ARRIVAL DATE	DEPARTURE DATE
Comp Room #1	Confirmation #:
1.	3.
2.	4.
Comp Room #2	Confirmation #:
1.	3.
2.	4.
Comp Room #3	Confirmation #:
1.	3.
2.	4.
Additional Paid Rooms for Team/Coach	Confirmation #:
1.	3.
2.	4.
Additional Paid Rooms for Team/Coach	Confirmation #:
1.	3.
2.	4.
If additional rooms ar	e required, please submit a second form.
I require special arrangements for an ADA a	accessible room: YES NO
PLEASE COMPLETE FOR ADDITIONAL	TEAM/COACH ROOMS ONLY
I would like to know my total includin	g tax to submit a check to the hotel when I arrive.
CREDIT CARD INFORMATION (if paying	g by credit card)
Credit Card Number:	Expiration Date:
CVC Code: Signatu	re: